# MICHIGAN REGIONAL TRAUMA REPORT 1st QUARTER 2021

### Region 8

**Statutory Reference:** R325.132 Rule 8 (3) (a) At least quarterly, a region shall submit evidence of ongoing activity, such as meeting notices, minutes to the department.

# **Resource Update: Facility Designation Status:**

Facility Name	Designated	Level of Designation
Aspirus Iron River	Yes	IV
Aspirus Ironwood	Yes	IV
Aspirus Keweenaw	Yes	III
Aspirus Ontonagon	Yes	IV
Baraga Memorial	Yes	IV
Dickinson County	No	Provisional
Helen Newberry Joy	Yes	IV
Munising Memorial	No	Provisional
OSF St. Francis	Yes	IV
Schoolcraft	No	Provisional
UP Health System Bell	No	Provisional
UP Health System Marquette	Yes	П
UP Health System Portage	Yes	III
War Memorial	Yes	III

# **Work Plan Objective Progress and Highlights:**

Complete sections that have progress within the quarter.

#### **Injury Prevention**

**Objective:** 325.132(3)(c)(ii)(A)306.2 By December 2020, the Regional Trauma Coordinator will survey regional injury prevention stakeholders including hospitals, senior provider networks, Medical Control Authorities, and others. The database shall contain program type, audience, locations, and contact persons.

Progress: Completed.

**Objective:** 325.135 (2) 203.5 By December 2020, the RTN will have communicated to injury prevention stakeholders the Regional Injury Prevention Plan that addresses at a minimum, the trauma registry identified top 3 injuries in the region; program identification, reach, and impact. The RTN will request feedback by March 2021 from the stakeholders regarding overlap and gaps. The plan shall be reviewed annually by the RTAC and RTN.

**Progress:** Injury Prevention Ad Hoc notified in January to reconvene to address objective.

**Objective:** 207.4 1. By December 2023, the region will support the Michigan Trauma Coalition's trauma system messaging campaign currently in development. With a focus on the messages applicable throughout the region. 2. Region 8 Trauma has collaborated with Region 8 MCA Network to have a page on the MCAN website with an anticipated go live date of December 2020. This website will be a publicly accessible location for items approved by the RTN to be placed there and populated by the Regional Trauma Coordinator.

**Progress:** Completed both and maintaining.

#### **Communications**

**Objective:** 325.132(3)(c)(ii)(C)302.9 Ongoing through December 2023, Regional Trauma shall continue to review and support Regional Healthcare Preparedness Communications initiatives when they are brought to the RTAC and RTN. The Regional Trauma Coordinator (RTC) is to continue throughout this three-year workplan to be a Regional Preparedness board member representing Regional Trauma.

**Progress:** Sustaining as the RTC is part of the Regional Healthcare Preparedness Board and part of the Regional Medical Coordination Center.

Indicator(s): 325.132 (3) (c)(ii) (B) 302.9 Regional Healthcare Preparedness utilizes the Regional Trauma survey of hospital communication redundancies and Regional Trauma shall update the survey by January 2021.

**Progress:** Completed and shared with Regional Preparedness.

**Indicator(s):** N/A 105.7 By January 2021, hospitals and MCAs within Region 8 will be surveyed to determine the following: 1. How they inform the broad medical community about trauma, 2. Who they inform, 3. When they inform, 4. What is inclusionary to this process and what is disseminated. Survey information will be shared with the Regional Trauma Network. Regional Trauma shall continue to utilize its Facebook page throughout this three-year plan for topics such as injury prevention initiatives, educational notices, national literature, and publication sharing.

**Progress:** Survey completed, and results will be shared with RTN in 2nd quarter.

#### Infrastructure

**Objective:** 325.132 (3)(c)(ii)(E) 302.1 By January 2021, the hospital trauma program managers and each MCA contact person shall participate in a survey conducted by the Regional Trauma Coordinator on how they assure medical directors collaborate on EMS trauma protocols.

**Progress:** Survey authored and deadline for completion is March 31, 2021.

#### **Regional Performance Improvement**

Indicator(s): -

**Progress:** Next inventory is expected to be reviewed in May 2021. Other objectives slated for work in 2022.

#### **Continuum of Care**

**Indicator(s):** 325.132 (3) (C)(ii) (F) 308.1 By December 2020, the RTN shall expand the current 24/7 medical specialties database to include information from each hospital on where they transfer specialty populations.

**Progress:** Reviewed, but not complete.

#### **Trauma Education**

Indicator(s): 325.132(3)(c)(ii)(J)310 Throughout 2020, the RTN will encourage hospitals and MCAs to identify their regularly offered trauma education programs. The RTAC will consolidate a master calendar of scheduled trauma education programs by January of 2021 based on information from hospitals, MCAs, and share/exchange lists with Region 7. The master calendar will include programs open to out-of-health-system employees and may be out-of-region and out-of-state.

**Progress:** Not complete as hospitals have stalled educational programs because of COVID-19.

#### Other relevant information:

The Regional Trauma Coordinator (RTC) continues to aid the Regional Healthcare Preparedness staff with EMResource tasks and attends the State of Michigan Preparedness Leadership meetings to assure coordination and collaboration. TEAMS meetings are hosted by the RTC for biweekly regional COVID situation updates, weekly long-term care COVID situation updates, and the Senior Provider Network, in addition to regional trauma meetings and individual hospital meetings to orient new trauma staff. Region 8 Trauma continues to be involved with the Upper Peninsula Traffic Safety Consortium. The RTC is a superuser for eICS, EMTrack, and EMResource with one hospital recently receiving an eICS training. The RTC entered a partnership with the State of Michigan Regional EMS Coordinator to assure 100% of the EMS agencies in Region 8 completed the national pediatric survey, which was successful. The RTC connected with each Region 8 hospital to assure they had at least one pediatric champion and then

prepared a shared spreadsheet of EMS and hospital pediatric champions. This spreadsheet is kept current by the RTC and shared with State Preparedness, EMS for Children's Coordinator, and Regional Preparedness. Regional Trauma has three members that sit on the newly formed EMS steering committee for the Northern Michigan University Center for Rural Health and its project on EMS Recruitment and Retention. A Region 8 data pilot project was submitted as supported by the Region 8 MCA Network and Region 8 Trauma Network. The MCAN contracted for EMS Elite software reports to be written that address completeness and accuracy of trauma-related fields in the EMS patient care reports. The RTC attended the annual TQIP meeting and integrated applicable information into an RTAC meeting. The Region 8 RTAC meetings follow a slide presentation of meeting materials that is also shared with the Region 7 RTC. The RTC from Regions 6 and 8 collaborate on RTAC agenda items. Significant time was dedicated by the State Trauma Registry Administrator and the Region 8 Trauma Coordinator for revising the Regional Inventory template and the reports necessary to collect the data for each region. Numerous data completion and accuracy questions were compiled and have become part of the data pillar projects stemming from the State Trauma Strategic Plan. Regional Trauma Leadership provided the review support of the trauma system support grants. It is anticipated that the expansion of submissions to regionalized efforts will positively impact trauma's work plan objectives.

# **Administrative Rule Requirements:**

⊠Yes □ No	Quarterly meeting minutes on shared drive.
□Yes ⊠ No	All MCA's participating in the RTN; awaiting letter from Dickinson County.
⊠Yes □ No	Performance improvement ongoing.